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Bib Data Sheet

CONFIRMATION NO. 5206

SERIAL NUMBER 10/675,002	FILING DATE 09/30/2003 RULE	CLASS 714	GROUP ART UNIT 2133	ATTORNEY DOCKET NO. EMC-03-046
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APPLICANTS

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** CONTINUING DATA *NO I.F.A.*** FOREIGN APPLICATIONS *NO I.F.A.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/22/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>			

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TITLE

Method of and system for error checking in a data storage system

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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